

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	B		6/9
O.I.P.E. CLASSIFIER		8	6-11-99
FORMALITY REVIEW	D B	70014	6-12-1999

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	1/1/2000
2	4/13/02
3	4/13/02
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Claim	Date
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If more than 150 claims or 10 actions  
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